

## APPLICATION DATA SHEET

### Application Information

Application Number::	Unassigned
Filing Date::	December 4, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	Paper
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	EXPANDABLE MEDICAL DEVICE WITH CURVED HINGE
Attorney Docket Number::	032304-089
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	11
Total Drawing Sheets::	10
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: F.  
Family Name:: Shanley  
Name Suffix::  
City of Residence:: Redwood City  
State or Province of Residence:: California  
Country of Residence:: US  
Street of Mailing Address:: 401 Camberly Way  
City of Mailing Address:: Redwood City  
State or Province of Mailing Address:: California  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94061

## **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (650) 622-2300  
Fax Number: (650) 622-2499

## **Representative Information**

Representative Customer Number:: 21839

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation	10/231,007	08/30/2002
10/231,007	Continuation	09/649,217	08/28/2000
09/649,217	Continuation	09/183,555	10/29/1998
09/183,555	Continuation	60/079,881	03/30/1998

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee Name:: Conor Medsystems, Inc.  
Street of Mailing Address:: 1360 Willow Road, 2<sup>nd</sup> Floor  
City of Mailing Address:: Menlo Park  
State or Province of Mailing Address:: California  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94025